

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 925 OF 956  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00540898	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>	

  

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 04 / 2014</b>	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		Amount <div style="border: 1px solid black; padding: 2px;">1000.00</div>	
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : <b>SE.397525</b>
Purpose of Expenditure COPY WRITING	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 11 / 2014</b>	
Name of Federal Candidate MARY L LANDRIEU		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">10310.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ►	

  

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 05 / 2014</b>	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		Amount <div style="border: 1px solid black; padding: 2px;">1000.00</div>	
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : <b>SE.397526</b>
Purpose of Expenditure COPY WRITING	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 11 / 2014</b>	
Name of Federal Candidate MARY L LANDRIEU		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">1000.00</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► <u>GENERAL RUNOFF</u>	

  

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px;">2000.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MR. PAULA KILGORE

Signature \_\_\_\_\_

[Electronically Filed]

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

**12 / 04 / 2014**